

Amendment to the Claims:

1. (Canceled)
2. (Canceled)
3. (Canceled)
4. (Canceled)
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12. (Canceled)
13. (Canceled)
14. (Canceled)
15. (Canceled)
16. (Canceled)
17. (Canceled)
18. (Previously presented) A catheter comprising:
a catheter shaft of sufficient length to perform an endoscopic procedure in
the biliary system and having a proximal end, a distal end, and a wire guide lumen

extending through the shaft between a proximal wire guide port and a distal wire guide port; and

a plurality of intermediate wire guide access ports located a not insubstantial distance distal of the proximal wire guide port and a not insubstantial distance proximal of the distal wire guide port,

wherein a plurality of sleeves are slidably disposed along the catheter shaft, the plurality of sleeves comprising a first sleeve that is movable between a first position restricting access from exterior of the catheter through a first intermediate wire guide access port and a second position wherein access is not restricted through the first intermediate wire guide access port, and further comprising a second sleeve that is movable between a first position restricting access from exterior of the catheter through a second intermediate wire guide access port and a second position wherein access is not restricted through the second intermediate wire guide access port.

19. (Original) The catheter of claim 18, further comprising a plurality of markers adjacent the plurality of intermediate wire guide access ports.

20. (Previously presented) The catheter of claim 18, wherein the catheter is adapted for use with an endoscope having a working channel extending between a distal port and a proximal port and wherein the first and second intermediate wire guide access ports are each accessible outside the endoscope when the catheter is positioned through the working channel such that the distal end of the catheter and the distal port of the working channel are substantially aligned.

21. (Previously presented) The catheter of claim 18, wherein the first and second intermediate wire guide access ports are located at least about 150 cm from the distal end of the catheter shaft.

22. (Previously presented) The catheter of claim 18, wherein at least one of the first and second intermediate wire guide access ports is located approximately 50 cm to 56 cm from the proximal end of the catheter shaft.

23. (Previously presented) The catheter of claim 18, wherein the first and second intermediate wire guide access ports are each located in a spaced apart fashion on the catheter shaft within the range of about 50 cm to 56 cm from the proximal end of the catheter shaft.

24. (Previously presented) The catheter of claim 18, wherein at least one of the first and second intermediate wire guide access ports is located approximately 144 cm to 150 cm from the distal end of the catheter shaft.

25. (Previously presented) The catheter of claim 18, wherein the first and second intermediate wire guide access ports are each located in a spaced apart fashion on the catheter shaft within the range of about 144 cm to 150 cm from the distal end of the catheter shaft.

26. (Previously presented) The catheter of claim 18, the catheter shaft further comprising a proximal half and a distal half, wherein the first and second intermediate wire guide access ports are each located in a spaced apart fashion on the proximal half of the catheter shaft.

27. (Canceled)

28. (Canceled)

29. (Canceled)

30. (Canceled)

31. (Canceled)

32. (Canceled)

33. (Canceled)

34. (Canceled)

35. (Canceled)

36. (Previously presented) A sphincterotome comprising:
a catheter shaft having a proximal end and a distal end;
a plurality of catheter lumens, including a lumen providing a passageway for injecting substances, a lumen including an electrically energizable compression member for cutting tissue, and a wire guide lumen extending from a proximal wire guide access port near the proximal end of the sphincterotome to a distal wire guide access port near the distal end of the sphincterotome; and
a plurality of intermediate wire guide access ports located between and spaced apart from the proximal end and the distal end,
wherein the sphincterotome is adapted for use with an endoscope having a working channel extending between a distal port and a proximal port and wherein the plurality of intermediate wire guide access ports are accessible outside the endoscope when the sphincterotome is positioned through the working channel such that the distal end of the catheter shaft and the distal port of the working channel are substantially aligned, further wherein one or more of the plurality of intermediate wire guide access ports are each configured to be disposed within the working channel when the distal end of the catheter shaft is extended distally past the distal port of the working channel.

37. (Original) The sphincterotome of claim 36, further comprising at least one slidable tube for allowing and restricting access to at least one of the plurality of intermediate wire guide access ports.

38. (Original) The sphincterotome of claim 36, wherein the electrically energizable compression member for cutting tissue has a portion that is external of the catheter shaft and wherein at least one of the plurality of intermediate wire guide access ports is near a handle of the endoscope when the sphincterotome is positioned inside the endoscope working channel and when the external portion of the compression member is outside of and adjacent the endoscope working channel distal port.

39. (Canceled)

40. (Canceled)

41. (Canceled)

42. (Previously presented) A method comprising the steps of:

inserting a catheter having a proximal wire guide port near a proximal end of the catheter, a distal wire guide port near a distal end of the catheter, a plurality of intermediate wire guide access ports including first and second intermediate wire guide access ports, at least one slidable tube for selectively allowing and restricting access to each of the first and second intermediate wire guide access ports, and a means for performing a medical procedure into an endoscope having a working channel extending between a distal port and a proximal port;

advancing the catheter through the working channel until the distal end of the catheter extends out through the distal port of the endoscope working channel, the first intermediate wire guide access port is disposed within the endoscope working channel, and the second intermediate wire guide access port is disposed proximally of and substantially adjacent to the proximal port of the working channel;

opening one of the at least one slidable tube to allow access to the second intermediate wire guide access port; and

inserting a wire guide through the second intermediate wire guide access port.

43. (Currently amended) A method comprising the steps of:

advancing a sphincterotome having a proximal end, a distal end, and a plurality of intermediate wire guide access ports located a not insubstantial distance distal of the proximal end and a not insubstantial distance proximal of the distal end into an endoscope having a handle; and

while a first intermediate wire guide access port of the plurality of intermediate wire guide access ports is positioned near the handle of the endoscope, sliding a first tube disposed along the sphincterotome to allow access to the first intermediate wire guide access port and performing a sphincterotomy.

44. (Original) The method of claim 43, while the first intermediate wire guide access port of the plurality of wire guide access ports is near the handle of the

endoscope, further comprising the step of advancing a wire guide through the first intermediate wire guide access port.

45. (Canceled)

46. (Previously presented) A sphincterotome comprising:
a catheter shaft having a proximal end and a distal end;
a plurality of catheter lumens, including a lumen providing a passageway for injecting substances, a lumen including an electrically energizable compression member for cutting tissue, and a wire guide lumen extending from a proximal wire guide access port near the proximal end of the sphincterotome to a distal wire guide access port near the distal end of the sphincterotome; and
a plurality of intermediate wire guide access ports located between and spaced apart from the proximal end and the distal end,
wherein the sphincterotome is adapted for use with an endoscope having a working channel extending between a distal port and a proximal port and wherein the plurality of intermediate wire guide access ports are accessible outside the endoscope when the sphincterotome is positioned through the working channel such that the distal end of the catheter shaft and the distal port of the working channel are substantially aligned, the sphincterotome further comprising at least one slidable tube for allowing and restricting access to at least one of the plurality of intermediate wire guide access ports.